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CC Docket No. 02-6
CC Docket No. 96-451 ✓

January 28, 2008

MARLENE H. DORTCH, SECRETARY
FEDERAL COMMUNICATIONS COMMISSION
OFFICE OF THE SECRETARY
445 12TH STREET, SW
WASHINGTON, DC 20554

RE: REQUEST FOR REVIEW FOR FRN: 1165877

CC: 02-6

TO WHOM IT MAY CONCERN:

The following is a Request for Review for FRN 1165877 filed on behalf of the
Wilmington School District, BEN 120412:

1. Contact Information:

Contact Name:	DAVID CORNETT
Address:	622 CLINTON AVENUE BRIDGEPORT, CT 06605
E-Mail:	dcornett@erateportal.com
Phone:	(203) 335-8303
Fax:	(203) 335-8313

2. Identify SLD Action Appealing:

Document Title:	FUNDING COMMITMENT DECISION LETTER
Funding Year:	2007
Document Date:	SEPTEMBER 18, 2007
Applicant Name:	WILMINGTON SCHOOL DISTRICT
Billed Entity Number:	120412
Form 471 Number:	586778
Statement:	THIS LETTER IS AN APPEAL.

3. Funding Request Number(s): 1628618, 1628619 & 1628620

4. Appeal Explanation:

A. FRN 1628618 – NEXTEL COMMUNICATIONS

The precise language the WILMINGTON SCHOOL DISTRICT is appealing as listed on the Funding Commitment Decision Letter: *"The Form 471 application was signed and submitted prior to the expiration of the 28-day waiting period from the day of the posting of the Form 470 to USAC Web Site thus violating program rules."*

This statement is incorrect. The establishing Form 470 number listed on Form 471 586778 for FRN 1628618 was listed incorrectly. This FRN is a request for Cellular Services purchased from Nextel Communications off a Massachusetts' state contract. The establishing Form 470 should be 150820000291548. This Form 470 represents contract number ITT-09 which can be found at the state's website here: <http://www.comm-pass.com>.

B. FRN 1628619 – CONVERSANT COMMUNICATIONS, INC.

The precise language the WILMINGTON SCHOOL DISTRICT is appealing as listed on the Funding Commitment Decision Letter: *"The Form 471 application was signed and submitted prior to the expiration of the 28-day waiting period from the day of the posting of the Form 470 to USAC Web Site thus violating program rules."*

The Wilmington School District contends that the ALLOWABLE CONTRACT DATE was listed incorrectly by the USAC-SLD on Form 470 300040000621332. The Form 470 was completed on January 8, 2007 (as evidenced by the signing date on the Form) and mailed to the SLD on January 9, 2007 (as evidenced by the USPS receipt dated January 9, 2007).

It appears that the USAC-SLD staff member who received the district's Form 470 listed the posting date on the Form 470 as the date of delivery (01/10/2007) rather than the postmark date of January 9, 2007. As the USAC-SLD guidelines state, the postmark date should have been the date recorded as the 470's POSTING DATE, **NOT** the date of delivery.

The district submits two other items for consideration:

1. The CERTIFICATION RECEIVED DATE for the Form 470 is listed correctly as January 9, 2007.
2. In addition, Wilmington School District Staff faxed the completed Form 470 to the SLD on January 9, 2007. The school district understands that the SLD does not accept faxed copies of forms; however, we have attached a fax certification page to this appeal response to show cause.

The district has attached a copy of the complete Form 470 package that was sent to the USAC-SLD via fax and through the USPS on January 9, 2007 as part of the response to this appeal.

The attached shows that the postmark date is January 9, 2007. As a result, on Form 470 300040000621332 the POSTING DATE should be revised to January 9, 2007 and the ALLOWABLE CONTRACT DATE should be revised to February 6, 2007. Further, Form 470 300040000621332 is the valid establishing Form 470 for FRN 1628619.

C. FRN 1628620 – VERIZON-MASSACHUSETTS

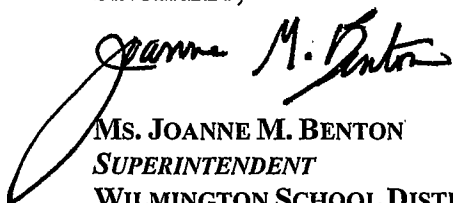
The precise language the WILMINGTON SCHOOL DISTRICT is appealing as listed on the Funding Commitment Decision Letter: *"The Form 471 application was signed and submitted prior to the expiration of the 28-day waiting period from the day of the posting of the Form 470 to USAC Web Site thus violating program rules."*

This statement is incorrect. The establishing Form 470 number listed on Form 471 586778 for FRN 1628620 was listed incorrectly. This FRN is a request for Long Distance Toll Calling purchased from Verizon-Massachusetts off a Massachusetts' state contract. The establishing Form 470 should be 150820000291548. This Form 470 represents contract number ITT-09 which can be found at the state's website here: <http://www.comm-pass.com>.

After the USAC-SLD has reviewed the above statements, as well as the supplemental information submitted in support of the above, the Wilmington School District asks that decision to deny Form 471 application number 586778 be reversed.

I trust the above and the attached to be sufficient in processing our application. However, if you need any additional information please do not hesitate to contact Mr. David Cornett (203-335-8303) who serves as the district's E-Rate coordinator.

SINCERELY,



MS. JOANNE M. BENTON
SUPERINTENDENT
WILMINGTON SCHOOL DISTRICT

(file: 586778 ICC Appeal 28JAN08)

Attachments

Wilmington Public Schools
161 Church Street
Wilmington, Massachusetts 01887
Telephone: (978) 694-6000 Fax: (978) 694-6005

William H. McAlduff, Jr.
Superintendent of Schools



Joanne M. Benton
Assistant Superintendent - Curriculum

FAX

Kevin J. McHugh
Director of Administration & Finance

To: Schools and Libraries Universal Service
Tel: (888) 203 - 8100
Fax: (888) 276 - 8736

From: Kevin McHugh - Wilmington Public Schools
Tel: (978) 694 - 6000
Fax: (978) 694 - 6005

Date: January 9, 2007

Re: Wilmington Public Schools Form 470 (E-Rate Program)

Pages: 16 pages (including cover sheet)

Dear Sir,

Since I was not able to complete the application on-line I have manually completed the form 470 for the Wilmington Public Schools. I am also mailing the application to the address listed on the page 14.

Since we no longer have a technology coordinator this is my first time going through this process. Therefore, should you need any additional information or have any questions please contact me at (978) 694-6000.

Thank you,

Kevin J. McHugh
Director of Administration & Finance
Wilmington Public Schools

MEMORY TRANSMISSION REPORT

TIME : 01-09-2007 12:16
TEL NUMBER : +9786946005
NAME :

FILE NUMBER : 350
DATE : 01-09 12:14
TO : 918882768736
DOCUMENT PAGES : 016
START TIME : 01-09 12:14
END TIME : 01-09 12:16
SENT PAGES : 016
STATUS : OK

FILE NUMBER : 350

*** SUCCESSFUL TX NOTICE ***

Wilmington Public Schools
161 Church Street
Wilmington, Massachusetts 01887
Telephone: (978) 694-6000 Fax: (978) 694-6005

William H. McAuliffe, Jr.
Superintendent of Schools

FAX



Kevin J. McHugh
Director of Administration & Finance

Joanne M. Benton
Assistant Superintendent - Curriculum

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Thank you,

Kevin J. McHugh
Director of Administration & Finance
Wilmington Public Schools

Schools and Libraries Universal Service Description of Services Requested and Certification Form 470

Estimated Average Burden Hours per Response: 4 hours

This form is designed to help you describe the eligible telecommunications-related services you seek so that this data can be posted on the Fund Administrator Web Site and interested service providers can identify you as a potential customer and compete to serve you.

Please read instructions before beginning this application. (You can also file online at www.sl.universalservice.org)

Applicant's Form Identifier (Create your own code to identify THIS Form 470)	Form 470 Application #
200720108	(To be assigned by administrator)

Block 1: Applicant Address and Identifications

1 Name of Applicant

Wilmington School District

2 Funding Year

July 1, 2007 through June 30, 2008

3 Entity Number

1204121

4a Street Address, P.O. Box, or Route Number

161 Church St.

City

Wilmington

State

MA

Zip Code

01887 2736

b Telephone Number

978 694 6000

Ext

c Fax Number

978 694 6005

5 Type of Application

- ☐ Individual School (individual public or non-public school)
- ☒ School District (LEA; public or non-public [e.g. diocesan] local district representing multiple schools)
- ☐ Library (including library system, library outlet/branch or library consortium as defined under LSTA)
- ☐ Consortium (intermediate service agencies, states, state networks, special consortia of schools and/or libraries)



Entity Number 120412 Applicant's Form Identifier 20072008
Contact Person Kevin McHugh Contact Telephone Number 978-694-6000

Block 1: Applicant Address and Identifications (continued)

6a Contact Person's Name

Kevin McHugh
First, if the Contact Person's Street Address is the same as in Item 4 above, check this box. If not, please complete the entries for the Street Address below.

b Street Address, P.O. Box, or Route Number

161 Church St.

City

Wilmington

State

Zip Code

MA

01887 2736

Check the box next to your preferred mode of contact and provide your contact information. One box MUST be checked and an entry provided.

c Telephone Number

978 694 6000

d Fax Number

978 694 6005

e E-mail Address

Kmchugh@wilmington.k12.ma.us

Block 2: Summary Description of Needs or Services Requested

7 This form 470 describes (check all that apply):

- a. ☒ Tariffed or month-to-month services to be provided without a written contract. A new Form 470 must be filed for non-contracted tariffed or month-to-month services for each funding year.
- b. Services for which a new written contract is sought for the funding year in Item 2.
Check if you are seeking a multi-year contract and/or a contract featuring voluntary extensions.
- c. A multi-year contract signed on or before 7/10/97 but for which no Form 470 has been filed in a previous funding year.

NOTE: Services that are covered by a signed, written contract executed pursuant to posting of a Form 470 in a previous funding year OR a contract signed on/before 7/10/97 and previously reported on a Form 470 as an existing contract do NOT require filing of a new Form 470.

What kinds of service are you seeking: Telecommunications Services, Internet Access, Internal Connections Other than Basic Maintenance, or Basic Maintenance of Internal Connections? Refer to the Eligible Services List at www.sl.universalservice.org for examples. Check the relevant category or categories (8, 9, 10 and/or 11 below), and answer the questions in each category you select.

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000

Block 2: Summary Description of Needs or Services Requested (Continued)

8 Telecommunications Services

Item 8, page 1 of 1

Do you have a Request for Proposal (RFP) that specifies the services you are seeking? If you check YES, your RFP must be available to all interested bidders for at least 28 days. If you check YES and your RFP is not available to all interested bidders, or if you check NO and you have or intend to have an RFP, you risk denial of your funding requests.

a YES, I have released or intend to release an RFP for these services. It is available or will become available on the Web at:

or via (check one) ☐ the Contact Person in Item 6 or ☐ the contact listed in Item 12.

b ☒ NO, I have not released and do not intend to release an RFP for these services.

Whether you check YES or NO, you must list below the Telecommunications Services you seek. Specify each service or function (e.g. local voice service) and quantity and/or capacity (e.g. 20 existing lines plus 10 new ones). See the Eligible Services List at www.sl.universalservice.org for examples of eligible Telecommunications Services. Remember that only eligible telecommunications providers can provide these services under the universal service support mechanism. Attach additional pages if needed.

c ☒ Check this box if you prefer discounts on your bill. ☐ Check this box if you prefer reimbursement after paying your bill in full. ☐ Check this box if you do not have a preference.

Service or Function

Local Phone Service

1) Quantity and/or Capacity

90

Service or Function

Long Distance Service

2) Quantity and/or Capacity

69

Service or Function

Cell Phones

3) Quantity and/or Capacity

39

Service or Function

4) Quantity and/or Capacity

Service or Function

5) Quantity and/or Capacity

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000

Block 2: Summary Description of Needs or Services Requested (Continued)

9 Internet Access

Item 9, page 1 of 1

Do you have a Request for Proposal (RFP) that specifies the services you are seeking? If you check YES, your RFP must be available to all interested bidders for at least 28 days. If you check YES and your RFP is not available to all interested bidders, or if you check NO and you have or intend to have an RFP, you risk denial of your funding requests.

a YES, I have released or intend to release an RFP for these services. It is available or will become available on the Web at:

or via (check one) the Contact Person in Item 6 or the contact listed in Item 12.

b NO, I have not released and do not intend to release an RFP for these services.

Whether you checked YES or NO, you must list below the Internet Access services you seek. Specify each service or function (e.g., monthly Internet service) and quantity and/or capacity (e.g., for 500 users). See the Eligible Services List at www.sl.universalservice.org for examples of eligible Internet Access services. Attach additional pages if needed.

c Check this box if you prefer discounts on your bill. Check this box if you prefer reimbursement after paying your bill in full. Check this box if you do not have a preference.

Service or Function

1) Quantity and/or Capacity

Service or Function

2) Quantity and/or Capacity

Service or Function

3) Quantity and/or Capacity

Service or Function

4) Quantity and/or Capacity

Service or Function

5) Quantity and/or Capacity

Entity Number 120412 Applicant's Form Identifier 20072008
Contact Person Kevin McHugh Contact Telephone Number 978-694-6000

Block 2: Summary Description of Needs or Services Requested (Continued)

10 Internal Connections Other than Basic Maintenance

Item 10, page 1 of 1

Do you have a Request for Proposal (RFP) that specifies the services you are seeking? If you check YES, your RFP must be available to all interested bidders for at least 28 days. If you check YES and your RFP is not available to all interested bidders, or if you check NO and you have or intend to have an RFP, you risk denial of your funding requests.

a YES, I have released or intend to release an RFP for these services. It is available or will become available on the Web at:

[Redacted text]

or via (check one) ☐ the Contact Person in Item 6 or ☐ the contact listed in Item 12.

b NO, I have not released and do not intend to release an RFP for these services.

Whether you check YES or NO, you must list below the Internal Connections services you seek. Specify each service or function (e.g., a router, hub and cabling) and quantity and/or capacity (e.g., connecting 1 classroom of 30 students). See the Eligible Services List at www.sl.universalservice.org for examples of eligible Internal Connections services. Attach additional pages if needed.

c Check this box if you prefer discounts on your bill. ☐ Check this box if you prefer reimbursement after paying your bill in full. ☐ Check this box if you do not have a preference. ☐

Service or Function

[Redacted text]

1) Quantity and/or Capacity

[Redacted text]

Service or Function

[Redacted text]

2) Quantity and/or Capacity

[Redacted text]

Service or Function

[Redacted text]

3) Quantity and/or Capacity

[Redacted text]

Service or Function

[Redacted text]

4) Quantity and/or Capacity

[Redacted text]

Service or Function

[Redacted text]

5) Quantity and/or Capacity

[Redacted text]

Entity Number 120412 Applicant's Form Identifier 20072008
 Contact Person Kevin McHugh Contact Telephone Number 978-694-6000

Block 2: Summary Description of Needs or Services Requested (Continued)

11 Basic Maintenance of Internal Connections

Item 11, page 21 of 21

Do you have a Request for Proposal (RFP) that specifies the services you are seeking? If you check YES, your RFP must be available to all interested bidders for at least 28 days. If you check YES and your RFP is not available to all interested bidders, or if you check NO and you have or intend to have an RFP, you risk denial of your funding requests.

a YES, I have released or intend to release an RFP for these services. It is available or will become available on the Web at:

or via (check one) ☐ the Contact Person in Item 6 or ☒ the contact listed in Item 12.

b NO, I have not released and do not intend to release an RFP for these services.

Whether you check YES or NO, you must list below the Basic Maintenance services you seek. Specify each service or function (e.g., basic maintenance of routers) and quantity and/or capacity (e.g., for 10 routers). See the Eligible Services List at www.sl.universalservice.org for examples of eligible Basic Maintenance services. Attach additional pages if needed.

c Check this box if you prefer discounts on your bill. ☐ Check this box if you prefer reimbursement after paying your bill in full. ☐ Check this box if you do not have a preference. ☐

Service or Function

1) Quantity and/or Capacity

Service or Function

2) Quantity and/or Capacity

Service or Function

3) Quantity and/or Capacity

Service or Function

4) Quantity and/or Capacity

Service or Function

5) Quantity and/or Capacity

Entity Number 120412 Applicant's Form Identifier 20072008
Contact Person Kevin McHugh Contact Telephone Number -78-694-6000

Block 2: Summary Description of Needs or Services Requested (Continued)

- 12 (Optional) Please name the person on your staff or project who can provide additional technical details or answer specific questions from service providers about the services you are seeking. This need not be the contact person listed in Item 6 nor the Authorized Person who signs this form.

Name

Title

Telephone Number

Ext.

Fax Number

E-mail Address

- 13a Check this box if there are any restrictions imposed by state or local laws or regulations on how or when service providers may contact you or on other bidding procedures. Please describe below any such restrictions or procedures and/or provide a Web address where they are posted and a contact name and telephone number.

Check this box if no state and local procurement/competitive bidding requirements apply to the procurement of services sought on this Form 470.

- 13b If you have plans to purchase additional services in future years, or expect to seek new contracts for existing services, you may summarize below (including the likely timeframes). If you are requesting services for a funding year for which a Form 470 cannot yet be filed online, include that information here.

Entity Number 120412 Applicant's Form Identifier 20072008
Contact Person Kevin McHugh Contact Telephone Number 978-694-6000

Block 3: Technology Resources

14 ☒ **Basic telephone service only:** If your application is for basic telephone service and voice mail only, check this box and skip to Item 16. Basic telephone service is defined as wireline or wireless single line voice service (local, cellular/PCS, and/or long distance) and mandatory fees associated with such service (e.g., federal and state taxes and universal service fees).

15 Although the following services and facilities are ineligible for support, they are usually necessary to make effective use of the eligible services requested in this application. Unless you indicated in Item 14 that your application is ONLY for basic telephone service, you must check one or both boxes in Items 15a through 15e. You may provide details for purchases being sought.

Desktop software: Software required

a has been purchased; and/or is being sought.

Electrical systems:

b adequate electrical capacity is in place or upgrading for electrical capacity is being sought.
has already been arranged; and/or

Computers: a sufficient quantity of computers

c has been purchased; and/or is being sought.

Computer hardware maintenance: adequate arrangements

d have been made; and/or are being sought.

Staff development:

e all staff have had an appropriate level of training/additional training has been scheduled; training is being sought.
and/or

f Additional details: Use this space to provide additional details to help providers to identify the ineligible services you desire.

Block 4: Recipients of Service

16 Eligible Entities That Will Receive Services:

Check the ONE choice (Item 16a, 16b or 16c) that best describes this application and the eligible entities that will receive the services described in this application. You will then list in Item 17 the entity/entities that will pay the bills for these services.

a Individual school or single-site library.

b Statewide application for (enter 2-letter state code) representing (check all that apply):

All public schools/districts in the state.

All non-public schools in the state.

All libraries in the state.

c School district, library system or consortium application to serve multiple eligible entities (see next page).

Does your application include INELIGIBLE entities? No Yes. If yes, complete item 18.

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000

Block 4: Recipients of Service (Continued)

16c ☒ School district, library system or consortium application to serve multiple eligible entities: Item 16c, page 1 of 1

Number of eligible entities 9

For these eligible entities, please provide the following:

Area Codes (list each unique area code)	Prefixes associated with each area code (first 3 digits of 7-digit phone number)
1) 978	265 423 479 694 815 374
2)	
3)	
4)	
5)	
6)	
7)	
8)	
9)	
10)	
11)	
12)	
13)	
14)	

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000

Block 4: Recipients of Service (Continued)

17 Billed Entities

Item 17, page 4 of 4

List the entity/entities that will be paying the bills directly to the provider for the services requested in this application. These are known as Billed Entities. At least one line of this item must be completed. If a Billed Entity cited on your Form 471 is not listed below, funding may be denied for the funding requests associated with this Form 470. Attach additional pages if needed.

Entity Number	Entity
1) 120412	Wilmington School District
2) 1191	Bourne School
3) 1187	North Intermediate School
4) 1189	Shawshaven Elementary School
5) 1192	West Intermediate School
6) 1190	Wildwood Elementary School
7) 224393	Wilmington Middle School
8) 1188	Woburn State Elementary School
9) 1194	Wilmington High School
10)	
11)	
12)	
13)	
14)	
15)	
16)	
17)	
18)	
19)	
20)	

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000

Block 4: Recipients of Service (Continued)

18 Ineligible Participating Entities: List the names of any entity/entities here Item 18, page 1 of 1
for whom services are requested that are not eligible for the Universal Service Program.
Attach additional pages if needed.

Ineligible Participating Entity	Area Code and Prefix
1)	
2)	
3)	
4)	
5)	
6)	
7)	
8)	
9)	
10)	
11)	
12)	
13)	
14)	
15)	
16)	
17)	
18)	

Do not write in this area.

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000

Block 5: Certification and Signature

19 ☒ I certify that the applicant includes: (Check one or both.)

a ☒ schools under the statutory definitions of elementary and secondary schools found in the No Child Left Behind Act of 2001, 20 U.S.C. Secs. 7801 (18) and (38), that do not operate as for-profit businesses, and do not have endowments exceeding \$50 million; and/or

b libraries or library consortia eligible for assistance from a State library administrative agency under the Library Services and Technology Act of 1996 that do not operate as for-profit businesses and whose budgets are completely separate from any school (including, but not limited to elementary and secondary schools, colleges, and universities).

20 ☒ I certify that all of the individual schools, libraries, and library consortia receiving services under this application are covered by technology plans that are written, that cover all 12 months of the funding year, and that have been or will be approved by a state or other authorized body, and an SLD-certified technology plan approver, prior to the commencement of service. The plans were written at the following level(s):

a individual technology plans for using the services requested in the application; and/or

b higher-level technology plans for using the services requested in the application; or

c ☒ no technology plan needed; application requests basic local, cellular, PCS, and/or long distance telephone service and/or voice mail only.

21 ☒ I certify that I will post my Form 470 and (if applicable) make my RFP available for at least 28 days before considering all bids received and selecting a service provider. I certify that all bids submitted will be carefully considered and the bid selected will be for the most cost-effective service or equipment offering, with price being the primary factor, and will be the most cost-effective means of meeting educational needs and technology plan goals. I certify that I will retain required documents for a period of at least five years after the last day of service delivered. I certify that I will retain all documents necessary to demonstrate compliance with the statute and Commission rules regarding the application for, receipt of, and delivery of services receiving schools and libraries discounts. I acknowledge that I may be audited pursuant to participation in the schools and libraries program.

22 ☒ I certify that the services the applicant purchases at discounts provided by 47 U.S.C. Sec. 254 will be used solely for educational purposes and will not be sold, resold or transferred in consideration for money or any other thing of value, except as permitted by the Commission's rules at 47 C.F.R. Sec. 54.500(k). Additionally, I certify that the entity or entities listed on this application have not received anything of value or a promise of anything of value, other than services and equipment sought by means of this form, from the service provider, or any representative or agent thereof or any consultant in connection with this request for services.


23 ☒ I acknowledge that support under this support mechanism is conditional upon the school(s) and/or library(ies) I represent securing access, separately or through this program, to all of the resources, including computers, training, software, internal connections, maintenance, and electrical capacity necessary to use the services purchased effectively. I recognize that some of the aforementioned resources are not eligible for support.

24 ☒ I certify that I am authorized to order telecommunications and other supported services for the eligible entity(ies). I certify that I am authorized to submit this request on behalf of the eligible entity(ies) listed on this application, that I have examined this request, and to the best of my knowledge, information, and belief, all statements of fact contained herein are true.

25 ☒ I certify that I have reviewed all applicable FCC, state, and local procurement/competitive bidding requirements and that I have complied with them. I acknowledge that persons willfully making false statements on this form can be punished by fine or forfeiture, under the Communications Act, 47 U.S.C. Secs. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. Sec. 1001.

26 ☒ I acknowledge that FCC rules provide that persons who have been convicted of criminal violations or held civilly liable for certain acts arising from their participation in the schools and libraries support mechanism are subject to suspension and debarment from the program.

Do not write in this area.

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000
Block 5: Certification and Signature (Continued)			
27	Signature of authorized person 	28	Date 01-08-2007
29	Printed name of authorized person William H. McAlduff		
30	Title or position of authorized person Superintendent of Schools		
31a	Street Address, P.O. Box, or Route Number 161 Church Street		
	City Wilmington		
	State MA		
	Zip Code 01887-2736		
31b	Telephone number of authorized person 978-694-6000	Ext. 2736	31c Fax number of authorized person 978-694-6005
31d	E-mail address of authorized person Wmcaiduff@wilmingtonschools.ma.us		
31e	Name of authorized person's employer Wilmington Public Schools		
<p>Service provider involvement with preparation or certification of a Form 470 can taint the competitive bidding process and result in the denial of funding requests. For more information, refer to the SLD web site at www.sl.universalservice.org or call the SLD Client Service Bureau at 1-888-203-8100.</p>			

Entity Number	120412	Applicant's Form Identifier	20072008
Contact Person	Kevin McHugh	Contact Telephone Number	978-694-6000

Block 5: Certification and Signature (Continued)

NOTICE: Section 54.504 of the Federal Communications Commission's rules requires all schools and libraries ordering services that are eligible for and seeking universal service discounts to file this Description of Services Requested and Certification Form (FCC Form 470) with the Universal Service Administrator. 47 C.F.R. § 54.504. The collection of information stems from the Commission's authority under Section 254 of the Communications Act of 1934, as amended. 47 U.S.C. § 254. The data in the report will be used to ensure that schools and libraries comply with the competitive bidding requirement contained in 47 C.F.R. § 54.504. All schools and libraries planning to order services eligible for universal service discounts must file this form themselves or as part of a consortium.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

The FCC is authorized under the Communications Act of 1934, as amended, to collect the information we request in this form. We will use the information you provide to determine whether approving this application is in the public interest. If we believe there may be a violation or a potential violation of any applicable statute, regulation, rule or order, your application may be referred to the Federal, state, or local agency responsible for investigating, prosecuting, enforcing, or implementing the statute, rule, regulation or order. In certain cases, the information in your application may be disclosed to the Department of Justice or a court or adjudicative body when (a) the FCC; or (b) any employee of the FCC; or (c) the United States Government is a party of a proceeding before the body or has an interest in the proceeding. In addition, information provided in or submitted with this form or in response to subsequent inquiries may also be subject to disclosure consistent with the Communications Act of 1934, FCC regulations, the Freedom of Information Act, 5 U.S.C. § 552, or other applicable law.

If you owe a past due debt to the federal government, the information you provide may also be disclosed to the Department of the Treasury Financial Management Service, other Federal agencies and/or your employer to offset your salary, IRS tax refund or other payments to collect that debt. The FCC may also provide the information to these agencies through the matching of computer records when authorized.

If you do not provide the information we request on the form, the FCC may delay processing of your application or may return your application without action.

The foregoing Notice is required by the Paperwork Reduction Act of 1995, Pub. L. No. 104-13, 44 U.S.C. § 3501, et seq.

Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, completing, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the reporting burden to the Federal Communications Commission, Performance Evaluation and Records Management, Washington, DC 20554.

Please submit this form to:

**SLD-Form 470
P.O. Box 7026
Lawrence, Kansas 66044-7026
1-888-203-8100**

For express delivery services or U.S. Postal Service, Return Receipt Requested, mail this form to:

**SLD Forms
ATTN: SLD Form 4703833 Greenway Drive
Lawrence, Kansas 66046
1-888-203-8100**

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